FOR INSTRUCTIONS, SEE BACK OF FORM			FORM	
DISCLOSURE SUMMARY	PAGE '		DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement	of Organization)		(Rev. 07/2003)	REPORT
Bill Yohn for City Counc	<u> </u>	·	For Office Use Of	alx
IMPORTANT: Indicate type of committee you are reporting for	r. 4			
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)Stat (5)County PAC (8)Sallot issue/Franchise Committee (7)Cou (8)Support State of Candidates	e Party (4)County/Local Candi nty/City Central Committee	date	Scanned	
CANDIDATE COMMITTEES ONLY:				
Candidate Name	Political Party	//	A	
Bill Yohn		/	CHOCK CONTROL	A Part of the Part
Office Sought City/Council Ward 3	District (if Senate o	or House)	DEC 5	BONED 7
CITY WARD 3	6.41 3	E7 E918	D .	2003
SIGNATURE OF TREASURER (or person filing this		57-5819 NE	DARES	24/03 IGNED
Late filed reports are sub	ject to possible civil	and criminal	penalties.	
SEE INSTRUCTIONS ON BACK AND COMPLET	TE THE FOLLOWING S	ENTENCE:		
I AM FILING A <u>final</u> (report date)	REPORT FOR AN	(A (1) ELECTION	/(2)NON-ELECT	TION YEAR.
Indicate one				
CHECK IF AMENDMENT TO REPORT DATED		Local C	ommittees, enter D	ate of Election
LICHECK IF AMENDMENT TO REPORT DATED			& Local Committee	
Check if this is final (termination) report and attach N (You must continue to file reports until a Notice		7 4.1 4 10	lection is held	
STATE	MENT OF CASH ON H	IAND		
CASH ON HAND at the beginning of the reporting period by the committee. This amount MUST be the of the last reporting period, or must be zero if the	same as the cash on hand a	at the end	\$ _1398.0	0
ADD TOTAL MONEY TAKEN IN THIS PERIO	D			
Schedule A: Cash Contributions total (Attach	Schedule A) (*also see In-ki	nd below)	2.0	0
Schedule F: Loans Received total (Attach Sch		•		
Schedule H: Total Sales of Campaign Propert	•			
(Schedule H applies to Candidates)	,			
		BUB-TOTAL	\$ 1400.0	0
SUBTRACT TOTAL MONEY SPENT THIS PE			1400.0	
Schedule B: Expenditures total (Attach Sched		l loans below	1400.0	0
Schedule F: Loan Repayments total (Attach S	•	. , ,		
CASH ON HAND at the end of this reporting period (if fi				· · · · · · · · · · · · · · · · · · ·
be zero) (Attach DR-3)	•	•••••••	0.0	0
**UNPAID BILLS (From Schedule D - Attach Schedule	D)		. 0.0	0
*IN KIND CONTRIBUTIONS (From Schedule E - Attach			·	
**OUTSTANDING LOANS (From Schedule F - Attach S	•			
CANDIDATE COMMITTEES ONLY:	wiedule r)	***************************************	J	<u></u>
			<u> </u>	
CONSULTANT BREAKDOWN (Schedule G Attached?)			YE	
VALUE OF CAMPAIGN PROPERTY (From Schedule H	ı - Attach Schedule H)	,	0.0	U

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMIT	TEE N	AME (Mus	t be sa	me as on	Statement of Organization)
E	3i11	Yohn	for	City	Council

SCHEDULE				
Α	MONETARY			
(Rev. 07/03)	RECEIPTS			
CHECK THIS BOX IF AMENDING FORM				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOI FUND- RAISER INCOME
	ID#				
11/03/03	CK#	Steven Benitz		\$2.00	1
	ID#				
	СК#				<u> </u>
	ID#				
	CK#				
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į	CK#				
	ID#		 		
	CK#				
			SUB-TOTAL		
			e of this schedule)	\$ 2.00	

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

\$ 2.00



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

IVE ND THE MONETARY EXPENDITURES

CHECK THIS BOX IF AMENDING FORM

B

(Rev. 07/03)

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Bill Yohn for City Council

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/30/0		Linda Dockwell 15345 Blacklocust Ventura,IA.	supplies	\$ 19 . 18
10/30/0	CK# 04	D & D Printing 840 12th St.N.W. Mason City,IA.50401	signs & stakes	\$433 . 19
11/6/03	ID# CK# 05	NAB Broadcaters KLSS Mason City,IA.50401	Radio Advertising	\$100.00
11/3/03		Clear Lake Mirror 12 North 4th Street Clear Lake,IA 50428	newspaper ads	\$540.00
11/7/03		Clear Lake Mirror 12 North 4th St. Clear Lake, IA.50428	hand-outs	\$130.75
11/14/03		Clear Lake Mirror 12 North 4th St.	Thank-yous	\$ 27.61
11/14/04	ID# CK# 09	Team Quest Clear Lake,IA.50428	printing	\$ 25.00
11/14/03	ID# CK# 10	Clear Lake Chamber 205 Main Ave. Clear Lake,50428	in-kind	\$ 9.00
			SUB-TOTAL	\$ 1284.73
			TOTAL (if last page of this schedule)	\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.6(3)(i).)

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Page	1	of	/	

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

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Bill Yohn for City Council

DATE EXPENDED (MM/DD/YR)	CÁNDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/24/0		Opportunity Village 1200 N.9th St.W. Clear Lake, IA.50428	Donation	\$ 115.27
	ID# CK#			
	ID# CK#			
naghtanna (1966-bagas) e a am sa asan at gaile	ID# CK#			
			SUB-TOTAL	\$ 115.27

TOTAL (if last page of this schedule)

400.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(I).)

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ECKS INICIDENCIAL	SHE HALLS	(M- P-(M-/AA

COMMITTEE NAME (Must be same as on Statement of Organization)								
Bi11	Yohn	for	City	Council				

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.



SCHEDULE D (Rev. 08/98)	INCURRED				
CHECK THIS BOX IF AMENDING FORM					

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS — SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

(for Schedule D)

			n received.
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
			\$ #.ØØ
		-	
	\$		
	\$		
*If actual figure is	1 of 1		

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the calluidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance end the estimated performance reasonably expected of the consultant.